

READING BOROUGH COUNCIL

REPORT BY DIRECTOR OF EDUCATION, ADULT & CHILDREN'S SERVICES

TO:	HEALTH AND WELLBEING BOARD		
DATE:	10th OCTOBER 2014	AGENDA ITEM:	5
TITLE:	INTEGRATION UPDATE (including BETTER CARE FUND SUBMISSION)		
LEAD COUNCILLOR:	COUNCILLOR HOSKIN / COUNCILLOR EDEN	PORTFOLIO:	HEALTH / ADULT SOCIAL CARE
SERVICE:	HEALTH / ADULT SOCIAL CARE	WARDS:	BOROUGH WIDE
LEAD OFFICER:	GABRIELLE ALFORD /SUZANNE WESTHEAD	TEL:	0118 937 4164
JOB TITLE:	DIRECTOR OF JOINT COMMISSIONING, BERKSHIRE WEST CCGs / HEAD OF ADULT SOCIAL CARE, RBC	E-MAIL:	Suzanne.westhead@reading.gov.uk

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The Better Care Fund (BCF), provides for local funding for health and social care services in ways which take forward the integration agenda. Funding comes via NHS England in 2014-15 and then as local pooled budgets from 2015-16.
- 1.2 In order to draw down the funding available through the BCF allocation, local authorities and clinical commissioning groups (CCGs) must submit agreed two-year plans for use of the BCF, which are approved by the Health and Wellbeing Board. This report describes Reading's revised (August 2014) BCF proposals, as shared with Board members during development and prior to re-submission, for the Board's formal approval.
- 1.3 Reading's August 2014 BCF submission is made up of four main documents plus a library of supporting documents. In its entirety

the submission therefore runs to several hundred pages, and it is not being reproduced in full as appendices to this report. However, Appendix 1 to this report (Better Care Fund Planning Template - Part 1 - Annex 1) contains a detailed description of the schemes included in the submission.

The full submission can be viewed online at: www.reading.gov.uk/meetings/details/3694 and a hard copy will be available for reference at the Board meeting.

2. RECOMMENDED ACTION

2.1 The Health and Wellbeing Board notes:

- (a) the progress made in developing plans for health and social care integration in Reading;
- (b) the recognition Reading's Better Care Fund plans have received as 'exemplar' proposals; and
- (c) the work that has been done in developing an Operational Resilience and Capacity Plan for the local health and social care system.

2.2 The Health and Wellbeing Board formally approves Reading's revised (August 2014) BCF submission as set out in the following documents:

- Better Care Fund Planning Template - Part 1
- Better Care Fund Planning Template - Part 1 - Annex 1
- Better Care Fund Planning Template - Part 1 - Annex 2
- Better Care Fund Planning Template - Part 2
- Better Care Fund Library of Supporting Documents

3. BACKGROUND

3.1 A first draft of Reading's BCF plan was approved by the Health & Wellbeing Board on 14th February, 2014. The Board then approved a process whereby Reading's first full submission could be lodged with NHS England and the Local Government Association (LGA) as required by 4th April, 2014.

3.2 Following receipt of the initial bids, around 30 local areas were judged to have developed particularly strong proposals for use of

the BCF and were invited to 'fast track' their bids through to the next stage. Reading was one of the areas included in this invitation, and negotiated the option of being fast tracked jointly with the neighbouring areas of Wokingham and West Berkshire, as a number of integration projects included in each of the Berkshire West BCF plans had been developed on a Berkshire West basis. Subsequently, however, whilst Reading opted to proceed on the fast track timetable and process, Wokingham and West Berkshire decided to pull back. By the end of August there were 5 local areas remaining on the fast track process.

- Reading
- Greenwich
- Nottinghamshire
- Sunderland
- Wiltshire

3.3 Local teams proceeding on the fast track process received consultancy support arranged by NHS England, which in Reading's case came from Deloitte. In deciding whether to accept the fast track invitation, both Reading CCGs together with the Council took into account the benefit of the extra support to complete bids which was available to fast tracked areas. An additional consideration was the anticipated advantage of accelerating the work that would be required to get the schemes described in the BCF underway.

3.4 The schemes within Reading's revised BCF plan, as set out at a seminar hosted by Health and Wellbeing Board members on 27th August, are as follows:

- Hospital @ Home
- Enhanced Support to Care Homes
- Berkshire West Connecting Care (Intra-operability)
- Discharge to Assess/ Time To Decide beds
- Whole System /Whole Week (7 day working, Health and Social Care Hub and Neighbourhood Cluster Teams)

These are described in further detail in the Better Care Fund Planning Template - Part 1 - Annex 1 as annexed to this report.

3.5 The revised BCF bid will be subject to a rigorous quality assurance

process. Initial feedback, whilst very positive, has indicated 5 areas for further development in Reading. Additional information related to these key lines of enquiry will need to be supplied in October 2014 with a view to obtaining final ministerial sign off of the bid by the end of October 2014.

- 3.6 Areas not included in the fast track process (including Wokingham and West Berkshire) re-submitted their BCF plans by 19th September.

4. FRAIL ELDERLY PATHWAY UPDATE

- 4.1 The schemes described in Reading's BCF proposals have been informed by the local development of a Frail Elderly Care Pathway, supported by the Kings Fund. The 10 key health and social care partners across the West of Berkshire have agreed on a series of key objectives for an improved customer pathway:

- A whole system shift from reacting to anticipating need;
- Personalised, shared and co-ordinated care planning - with the client at the centre;
- A generic care worker delivering routine and consistent care - determined by individual not organisational need;
- A common assessment and care planning process with no duplication by multiple agents; and
- Ensuring the most effective and efficient use of resources to reduce duplication.

- 4.2 The focus is on moving towards one assessment, one care plan, and one worker - to co-ordinate the individual's journey through a single care system. Work is now underway to develop robust plans which include:

- The development of a Health and Social Care Hub, which will mean that there is only one number both for patients/service users and for professionals
- Shared information technology and information sharing protocols
- Developing our workforce to meet the needs of our local population whilst delivering a quality service
- Developing a 'cluster' approach which will provide a multi-disciplinary localised service based around groups of GP practices

- The expansion of services so that the local care offer is available across the whole system across the whole week.

4.3 Alongside service redesign, work has been undertaken on the economic modelling to determine where savings can be achieved. This has been based upon key assumptions made on both national and local data.

5. OPERATIONAL RESILIENCE AND CAPACITY PLAN

5.1 The Berkshire West CCGs in partnership with the Royal Berkshire Hospitals NHS Trust, Berkshire Healthcare Trust, Reading Borough Council, Wokingham Borough Council, West Berkshire Borough Council and South Central Ambulance Service have recently developed a Berkshire West Operational Resilience and Capacity Plan (ORCP) for 2014/15 which has been signed off by all Provider CEOs. The requirement for this Plan was set out in the ORCP Planning Guidance published in June 2014 and prepared by NHS England (NHSE), the NHS Trust Development Authority (TDA), Monitor and the Association of Directors of Adult Social Services.

5.2 The Berkshire West plan sets out a proposed approach to implementing and addressing the guidance locally and includes the following:

- Context and description of partnership work to date in addressing pressures on Accident & Emergency attendance and Non Elective Admissions activity;
- Roles of the Urgent Care Programme Board (UCPB) and Planned Care Programme Board (PCPB) in driving partnership working across the health and social care economy, and holding organisations to mutual account for delivery;
- How the health and social care organisations in Berkshire West intend to address the elements of mandatory good practice and the wider planning elements detailed within the guidance;
- Which schemes and initiatives will be funded from the £2.6m national resilience monies allocated to the local care system;
- How the impact of investments will be tracked; and
- Governance arrangements including reporting arrangements, role of the UCPB and PCPB chairs, organisational accountability and risks.

Within the Berkshire West plan, the chairs of the CCGs, the Urgent Care and the Planned Care Programme Boards will be held to account for successful delivery of the plan alongside provider CEOs.

- 5.3 The Berkshire West ORCP has been submitted to NHS England for approval and formal feedback is expected shortly. Initial feedback is that this is a good plan with evidence of good cross organisational engagement within the Urgent Care Programme Board.

6. CONTRIBUTION TO STRATEGIC AIMS

- 6.1 Reading health and social care providers and commissioners have already set out an intention to streamline and integrate services for the benefit of patients and the public. The Reading BCF submission develops the vision and ideas set out in an earlier (unsuccessful) bid at a Berkshire West level to be an Integration Pioneer. The BCF submission also draws on and develops the strategic priorities set out in Reading's Health and Wellbeing Strategy (2013) and Prevention Framework (2011). It supports the vision outlined in the Berkshire West Strategic plan 2014-2019 and the Reading CCGs operating plans 2014-2016 to 'keep people well and out of hospital in partnership'.

7. COMMUNITY INVOLVEMENT

- 7.1 The BCF submission has drawn on Reading patient, service user and public feedback gathered recently across a range of health and social care involvement channels, particularly the RBC-led 'Let's Talk Health' programme, the Home Carer User Interview Project (a joint RBC and Healthwatch initiative), NHS Call to Action events and the 2013 Dementia and Elderly Care Conference. This feedback indicates a strong appetite for better integrated health and social care, and also illustrates that maintaining independence and having choice and control over how they receive care is very important to the people of Reading.
- 7.2 Reading's BCF submission sets out a shared commitment to ensure future service development involves and is centred on the individuals receiving care. The details of how this will operate will be part of the implementation plans for the various schemes identified.

8. LEGAL IMPLICATIONS

8.1 Councils currently have a range of statutory responsibilities and powers to provide community care services for people with higher level support needs, and their carers. The Care Act consolidates previous legislation, and also gives local authorities new responsibilities to arrange services which prevent or delay people's conditions deteriorating, to provide 'care accounts' for those who fund their own care and to offer greater support for unpaid/family carers. Part of the national conditions for accessing BCF allocations are that funding will be used to protect social care services, including supporting implementation of the Care Act.

9. EQUALITY IMPACTS

9.1 All public sector bodies are under a legal duty to comply with the public sector equality duties set out in the Equality Act 2010. In order to comply with these duties, policies and services should be developed with a view to preventing discrimination, and also protecting and promoting the interests of 'protected' groups.

9.2 As integration plans are developed and the need for specific policy or service change identified, equality analyses will be carried out so that conscious and open minded consideration can be given to the impact of the equality duty in relation to the integration of health and social care locally.

10. FINANCIAL IMPLICATIONS

Revenue Implications

10.1 Nationally, the BCF comprises £1.1bn in 2014-15 and will increase to £3.8 bn in 2015-16. For Reading the overall pool available to fund the various service options will be £9.024m in 2015-16.

10.2 In 2014-15 the transfer of funding to adult social care 'to benefit health' will continue be distributed using the social care relative needs formula (RNF). The formula for distribution of the full BCF in

2015-16 will be based the CCG formula and then mapped to local authorities. Some elements (the current social care transfer, adult social care capital funding, and Disabled Facilities Grants) will be allocated in the same way as in 2014-15.

- 10.3 It is for local areas to decide how to spend their allocations on health and social care services through their joint plan. However, half of the 2015-16 BCF 'pot' will come from NHS funding and the other half will be made up from Carers Break Funding, CCG re-ablement funding, capital funding to include Disabled Facilities Grant allocations, and previously announced transfers of funding from health to adult social care. Local plans for the BCF should therefore set out the level of resource which will applied to maintaining services funded through these channels previously, particularly the amounts dedicated to carer-specific support and intended to ensure a continued focus on re-ablement. A key element of the funding is that it will need to be realised from existing commitments across the health and social care economy

Capital Implications

- 10.4 The majority of the funding will be revenue, but the fund does include the Social Care Capital Grant and the Disabilities Facilities Grant. It is expected that Health will also contribute some capital to fund specific programmes such as ICT integration and other appropriate schemes.

Value for Money

- 10.5 The options that are being identified within the Better Care Fund are being reviewed to ensure they deliver both improved patient/client outcomes but also doing this efficiently within the resources available.

Risks

- 10.6 The Better Care Fund is a catalyst to help local health services and local government to make substantial changes to the way health and care is delivered. However, with any change of this complexity there are significant risks that all the new schemes will be successfully delivered. This is a major issue for the partners as part

of the funding is reliant on the improved performance being delivered.

- 10.7 Although not ring-fenced, identified proportions of the BCF are intended to be used to help councils to prepare for new obligations under the Care Act, e.g. new entitlements for carers, stronger provision of information, advice and advocacy, and moving towards the capped cost system. At this stage, modelling is continuing to estimate what the full financial implications of the Care Act will be for Reading. Of necessity, this modelling is based on draft regulations as the final regulations have not yet been published. Within the national guidance for the BCF, there was an assumption that £135m nationally could be allocated to cover some of these costs. Reading has used this guidance and has applied the relevant portion to the BCF plan. However, there are grounds for concern that this will not cover the true cost of the change, and there is a risk for the Council that it will not receive the necessary funding to cover the costs of this change.
- 10.8 The governance and resourcing implications of the changes being proposed are significant. Further work is required to determine which organisation will in 2015-16 hold the pooled budgets and what the governance arrangements will be. In addition, this work will require a large amount of resource from staff across the various organisations at a time when all of the organisations' staff are under significant work load pressures. It will be important for the successful delivery of the BCF that these issues are appropriately examined and solutions identified as the work to deliver the BCF is developed.

11. BACKGROUND PAPERS

- 11.1 The full Reading August 2014 BCF submission is contained in the following documents:

Better Care Fund Planning Template - Part 1
Better Care Fund Planning Template - Part 1 - Annex 1
(appears as appendix 1 to this report)
Better Care Fund Planning Template - Part 1 - Annex 2
Better Care Fund Planning Template - Part 2
Better Care Fund Library of Supporting Documents

These documents are all available at www.reading.gov.uk/meetings/details/3694 and a hard copy for reference will be available at the Board meeting.

- 11.2 Guidance on the purpose of the BCF, how to complete the planning templates, and the BCF assurance process have been issued by NHS England and the Local Government Association, and can be viewed online at:

http://www.local.gov.uk/health-wellbeing-and-adult-social-care/-/journal_content/56/10180/4096799/ARTICLE